## WISCONSIN DEPARTMENT OF REGULATION & LICENSING



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STATE OF WISCONSIN		
BEFORE THE BOA	RD OF NURSING	
IN THE MATTER O	F THE DISCIPLINARY	
PROCEEDINGS AG		
Pamela Jean Ol	SON, I PN	FINAL DECISION AND ORDER
RESPONDENT	30H, LIN	LS000707NUR
		Division of Enforcement Case No. 00 NUR 129
The parties to this	s action for the purposes of section 227.5	
Pamela Jean Olson 14461 55 <sup>th</sup> Street N		
Oak Park Heig	hts MN 55082	
Department of Regulation and Licensing Division of Enforcement		
PO Box 8935 Madison, WI 5	3708-8935	
The parties in this matter agree to the terms and conditions of the attached Stipulation as the final decision of this matter, subject to the approval of the Board. The Board has reviewed this Stipulation and considers it acceptable.		
Accordingly, the E	Board in this matter adopts the attached	Stipulation and makes the following:
		FINDINGS OF FACT
1. Pamela Jean O	lson (DOB 12-17-1962) is duly licensed a	as a practical nurse in the state of Wisconsin (license 31-33629). This license was first granted on May 15, 1996.
2. Ms. Olson's most recent address on file with the Wisconsin Board of Nursing is 14461 55th St N, Oak Park Heights, MN 55082.		
3. On April 30, 1999, Ms. Olson's nursing registration expired. Ms. Olson did not renew her registration until on or about March 1, 2000. Ms. Olson admits she worked as a Licensed Practical Nurse at Hudson Physicians, 402 Wisconsin Street, Hudson, WI 54016, during the time her license was expired.		
4. In resolution of	this matter, Ms. Olson consents to the e	entry of the following Conclusions of Law and Order.
Pamela Jean Olso	n by the conduct described above has	CONCLUSIONS OF LAW violated sec. 441.10(3)(b), Stats. and Wisconsin Administrative Code § N 7.04(15).
Tamela Jean Olso	n, by the conduct described above, has	ORDER
NOW, THEREFORI	E, IT IS HEREBY ORDERED that Pamela I	
IT IS FURTHER ORDERED that the license of Ms. Olson is LIMITED as follows:		
1. Within thirty (30) days from the date of this Order, Respondent shall submit documentation to the Board certifying that she has notified the following of her work as a nurse without current registration:		
	a. All employers where Respondent w	orked as a nurse between April 30, 1999 and March 1, 2000;
	b. All private insurance carriers (if any and March 1, 2000; and	y) who provided coverage and paid for nursing services performed by Respondent during the time period between April 30, 1999
	c. E.D.S. Federal, 6406 Bridge Road, time period between April 30, 1999 ar	Madison, WI 53784, if Medicare/Medicaid provided coverage and paid for nursing services performed by Respondent during the Id March 1, 2000.
certified check		spondent shall pay partial costs of this proceeding in the amount of seventy-five (\$75.00) dollars. Payment shall be made via payable to the Wisconsin Department of Regulation and Licensing, and mailed to Department Monitor, Division of
4. This Order shall	Il become effective upon the date of its s	igning.
WISCONSIN BOAF	RD OF NURSING	
Ву:		
Anne Brewer, R.N.		7-7-00
A member of the Board		Date